

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthant
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 711539 (7)

1. Corporation Name
GREATER MIAMI SHORES CHAMBER OF COMMERCE, INC.



Principal Place of Business: 9701 NE 2ND AVE. MIAMI SHORES FL 33138 US
Mailing Address: 9701 NE 2ND AVE. MIAMI SHORES FL 33138

3. Date Incorporated or Qualified: 09/26/1966
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-0822321
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

21. Principal Place of Business: Suite, Apt. #, etc.; City & State; Zip; Country
22. Mailing Address: Suite, Apt. #, etc.; City & State; Zip; Country

9. Name and Address of Current Registered Agent
**SOLI, LEWIS E.
9701 NE 2ND AVENUE
MIAMI SHORES FL 33138**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.003, Florida Statutes.

SIGNATURE: *[Signature]* DATE: 4/24/96

12. OFFICERS AND DIRECTORS

TITLE	P	JOHNSON, STEVE	<input type="checkbox"/> DELETE
NAME		209 NE 95 ST., STE. #1	
STREET ADDRESS		MIAMI SHORES FL	
CITY-ST-ZIP			
TITLE	DVP	MADSDEN, PAUL	<input type="checkbox"/> DELETE
NAME		1936 N.E. 148TH STREET	
STREET ADDRESS		N. MIAMI FL	
CITY-ST-ZIP			
TITLE	DS	BAXTER, DONNA	<input type="checkbox"/> DELETE
NAME		10626 NE 10TH COURT	
STREET ADDRESS		MIAMI FL	
CITY-ST-ZIP			
TITLE	DVP	SMITH, CHARLES W.	<input type="checkbox"/> DELETE
NAME		918 NE 92ND ST	
STREET ADDRESS		MIAMI SHORES FL	
CITY-ST-ZIP			
TITLE	DVP	AGOSTA, MARY ROSS	<input type="checkbox"/> DELETE
NAME		9401 BISCAYNE BLVD.	
STREET ADDRESS		MIAMI SHORES FL	
CITY-ST-ZIP			
TITLE	DT	HOLTS, RANDY	<input type="checkbox"/> DELETE
NAME		9190 BISCAYNE BLVD.	
STREET ADDRESS		MIAMI SHORES FL	
CITY-ST-ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

DT KELLIE BEELEY
9899 NE 2ND AVE
MIAMI SHORES, FL 33138

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: 4/24/96 (305) 981-3162
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: LEWIS E. SOLI

CR2E037 (12/95)